SPECIFICATIONS FOR MAGNETIC MEDIA FILING

OF

SUSPICIOUS ACTIVITY REPORTS (SAR)

(FORM TDF 90-22.47)

REVISED March, 2008

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE

These Specifications for Magnetic Media Filing of Suspicious Activity Reports (Form TDF 90-22-47) were developed under the sponsorship of the following:

Department of the Treasury

Director, Financial Crimes Enforcement Network

Internal Revenue Service

Enforcement Division, Compliance Domain

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Revision History

Version Number	Date	Reason for Change
1.1	3/31/08	State, Country and ZIP Code reference central lists on FinCEN.gov.

Purpose

The purpose of this specification is to provide the requirements and conditions for filing Suspicious Activity Report (SAR), Form TDF 90-22.47 on magnetic media.

The magnetic media forwarded to the Enterprise Computing Center - Detroit (ECC-D) will be considered as a substitute for the paper document, provided the transaction is accepted by the ECC-D system. Receipt and acknowledgment of magnetic media is further discussed in a later section.

These specifications apply to the program for the filing of SARs submitted on magnetic cartridge, or diskette.

Approval to participate in the magnetic media reporting program is contingent upon the filer following these steps:

- Review specifications
- File application to participate
- Satisfy Acceptance Testing Procedures
- Receive formal ECC-D approval
- File reports every two to four weeks (as required)
- Monitor quality

Continued participation in the Magnetic Media Program is contingent upon maintenance of quality standards and timely reporting.

Application for Magnetic Media Reporting

For purposes of these specifications, the FILER is the organization responsible for filing the SAR. The Financial Institution and transmitter may be the same or different organizations.

Filers are required to complete and send to the Internal Revenue Service Enterprise Computing Center - Detroit (ECC- D) an "Application for Magnetic Media Reporting of Currency Transactions" (Form DCC-4419).

The application should be filed with ECC-D as soon as possible after receipt of these specifications. ECC-D will act on the application and notify the applicant of authorization to file. Magnetic media may not be filed with ECC-D until the applicant has received approval.

Approval of applications to file SARs on magnetic media will be contingent upon the applicant satisfactorily passing an acceptance test.

Filing of Magnetic Media Reports General:

ECC-D will advise magnetic filers when they may begin to file using magnetic media. This will be as early as possible after receipt of the application. Until this notification has been issued, magnetic media will not be accepted.

If files are unreadable due to format errors, etc., we will contact the transmitter by telephone to send a replacement for the file.

Any filer whose error rates remain at a high level on a continuing basis may risk being discontinued as a magnetic media filer. Filers are required to retain a copy of the SAR data and all original supporting documentation or business record equivalent for five years from the date of the suspicious activity report. All supporting documentation must be made available to appropriate authorities upon request.

Transmittal Process:

Magnetic media files and transmittals are submitted to ECC-D. Form(s) DCC-4804 and DCC-4802 (for multiple filers), must accompany magnetic submissions. **DO NOT MAIL THE MEDIA AND THE TRANSMITTAL SEPARATELY**. ECC-D encourages the use of a substitute computer generated Form 4804 and/or Form 4802, which includes all information requested on the actual form. Substitute forms should follow the format of the transmittal form.

All submitted magnetic media files, must include the following:

- A Form 4804 or computer generated substitute.
- The magnetic media with an external identifying label.
- A statement on the outside of the shipping container that says 'Attn: Tape Library Deliver unopened: SAR Magnetic Media. If there is only one container, mark the outside as 1 of 1. For multiple containers, include the sequence (e.g., 1 of 3, 2 of 3, etc.).
- ECC will not pay or accept 'Collect on Delivery' or 'Charged to IRS' shipments of SARs on magnetic media that an individual or organization is legally required to report.

Data Sequencing and Validation Criteria

The following data controls must be

followed or the SAR magnetic media will be rejected. The data records must be in the following sequence:

• Transmitter (1A)

There can only be one of this record type and it must be the first record on the file.

Financial Institution (2A)

There can be more than one of this record type depending on the number of different Financial Institutions, which are included on the file. This record type will immediately precede all records, which relate to the Financial Institution.

Suspicious Activity (3A)

There can be more than one of this record type on the file depending on the number of suspicious activities being reported for Financial Institution.

• Suspect Information (4A)

There can be more than one of this record type dependent on the number of persons involved in this suspicious activity.

Narrative Description (6A)

There can be more than one of this record type depending on the length of the explanation given for the suspicious activity.

• Branch Summary (9A)

There should be one of these records on the file for each Financial Institution branch that is being reported.

• Financial Institution Summary (9B)

There must be one of this record type for each Financial Institution reporting. It must be the last record associated with the Institution.

• File Summary (9Z)

There must be one of these records

on the file and it must be the last record on the file.

Acceptance Procedures

The Filer will be asked to provide a test file to ECC-D that is consistent with these requirements.

Final acceptance of the filer's test file will be as follows:

- The test data will consist of a set of reports, containing the data normally supplied by the filer.
- The test file should contain more than 25 reports.
- Upon receipt of the filer's test file ECC-D will test, review and provide feedback to the filer within ten working days.
- If 95% of the filer's test returns are error-free and the file is correctly formatted, final acceptance will be issued by ECC-D allowing the filer to participate in the Magnetic Media Program.
- When a test file is found to be incorrectly formatted or more than 5% of the filer's test returns contain errors, ECC-D will identify to the filer the type of errors encountered. A new set of test data should be forwarded to ECC-D. The filer is responsible for correcting their software to eliminate the identified errors and any related errors.
- If, after three attempts, the filer's test file continues to be unacceptable, the filer must confer with the SAR Magnetic Media Coordinator and develop an acceptable plan for correcting deficiencies before any further tests are allowed.
- Filers granted acceptance will be notified.

- When several filers use the same service bureau system, only one test file of magnetic returns is required to cover the acceptance of all participating filers.
- ECC-D will issue a Transmitter Control Code (TCC) to be used with all submissions of SARs.

Filing Dates

Filing using magnetic media will be on a continuous basis. Magnetic media must be prepared and submitted to ECC-D for processing no later than 30 calendar days after the date of initial detection of facts that may constitute a basis for filing a SAR. If no suspect was identified on the date of detection of the incident requiring the filing, a Financial Institution may delay filing a SAR for an additional 30 calendar days to identify a Suspect. In no case shall reporting be delayed more than 60 calendar days after the date of initial detection of a reportable transaction.

Receipt and Acknowledgment of Magnetic Media Files

SARs will not be acknowledged to the transmitter. Cartridges will be returned with the original data removed.

Filing Corrected Reports

If a SAR that was prepared and submitted on magnetic media must be corrected, you must file a complete corrected SAR as soon as possible. All fields must be completed with the correct information, NOT JUST THE DATA FIELDS NEEDING CORRECTION. Corrected SARs will be accepted on magnetic media. Corrected and Supplemental magnetically filed SARs must include the appropriate code indicator

Magnetic Media Coordinator Contacts

Direct all requests for Magnetic Media related publications or information to the following address:

SAR Magnetic Media Coordinator Internal Revenue Service 985 Michigan Ave. Detroit, MI 48226-2458 Phone Number (313) 234-2011 Fax Number (313) 234-1614

General Specifications

Cartridge Specifications:

These specifications define the file characteristics acceptable for magnetic media reporting. These characteristics must be adhered to unless specifically authorized by the ECC-D in writing.

All records should be fixed in length to the size specified for each record type. Usually ECC-D will be able to process a compatible cartridge file. The standard file characteristics are 18 or 36 track cartridges, EBCDIC, odd parity, 6250 BPI and standard labels. The standard data set name to be used on cartridges is ITFMP.SARMAG.TDF9.

Files must have the following attributes:

An external label must appear on each cartridge submitted for processing. The following information should appear on the label:

- The transmitters name
- Date of preparation
- A reel number assigned by the preparer that must match the reel number on the internal label (6 alpha numeric characters)
- Number of reels in file, including reel

sequence number (i.e., 01 of 08)

Note: To allow better control processing of your files, uniquely numbered cartridge numbers must be transmitted when using multiple cartridges.

For the purposes of these specifications the following conventions must be used for internal labels:

Header Label

Standard headers provided they begin with 1HDR, HDR1, VOL1, VOL2, UHL1, or 'b LABEL'.

Consist of a maximum of 80 positions.

Trailer Label

Standard trailer labels may be used provided that they begin with 1EOR, 1EOF, EOR1, EOF1, EOV1, or EOV2.

Consist of a maximum of 80 positions.

Diskette Specifications:

These specifications define the file characteristics acceptable for diskette media reporting. These characteristics must be adhered to unless specifically authorized by ECC-D in writing.

All records should be fixed in length to the size specified for each record type. Usually ECC-D will be able to process a compatible diskette file. The standard file characteristic is 3.5 inch diskette double sided/double density or double sided/high density. The standard data set name to be used on files is **SARMAG.**

All diskettes must be generated using MS-DOS on an IBM compatible

personal computer in ASCII mode. All alphabetic characters must be in **upper case only.**

An external label must appear on each diskette submitted for processing. The following information should appear on the label:

- Transmitter's name
- Date of preparation
- Diskette sequence number (i.e., 01 of 03)
- Coverage beginning and ending dates
- Number of SAR records

The diskette records defined in these specifications should be unblocked 420 character records. The industry standard record delimiter for diskette data records is the two byte combination of 0D0A hexadecimal characters (carriage return, line feed).

Note: Diskettes will not be returned.

Overview of File

This file is an alternative to filing SARs on paper. If you file a transaction on MAGNETIC MEDIA DO NOT FILE a paper SAR for the same SAR.

All initial, corrected, supplemental and late report filings can be submitted on magnetic media.

SARs, which have missing or incomplete information, are considered original (initial) filings. When information becomes available they should be replaced on magnetic media, include the corrected or supplemental indicator code.

All dates are to be in the format of

century, year, month, day with month and day both **being right justified and zero filled.**

Money amounts **should be right justified and zero filled.** Enter dollar amounts only, all cents should be rounded up to the next higher dollar amount (i.e., \$10,000.01 should be reported as \$10001).

All name, address, and city fields are to be **left justified and space filled.**

All Alphabetic characters must be in upper case.

All name and address fields relating to SAR data must follow the Name Editing Conventions specified in the attachments.

Account numbers must NOT contain leading zeroes unless they are part of the actual account number.

All entries must be:

Left justified and space filled.

Do not include lower case characters in the file.

All 'Filler' fields should be space filled.

Do not use low values as a substitute for spaces.

Blank fields must be space filled.

Record Types (Input) Transmitter (1A) Record - Required

The first record on each file is to be the transmitter record, which will contain information identifying the transmitter (person or organization handling the data accumulation and formatting). There will be only one Transmitter Record on each magnetic media file. Include the following data elements in this record:

Field Pos.	Field Name	Length	Description and Remark
1-2	Record Type	2	Required. Enter `1A`.
3-37	Transmitter Name	35	Required. Enter the name of the individual or organization that is transmitting the transactions on this file.
38-67	Transmitter Address	30	Required. Enter the street address of the transmitter.
68-92	Transmitter City	25	Required. Enter the city of the transmitter.
93-94	Transmitter State	2	Required. Enter the transmitter state in abbreviated form. Use the correct abbreviation from http://www.fincen.gov/country_and_state_codes.pdf
95-103	Transmitter Zip Code	9	Required. Enter the transmitter zip code.
104-106	Transmitter Area Code	3	Required. Enter the transmitter area code.
107–113	Transmitter Telephone	7	Required. Enter the telephone number.
114–148	Transmitter Contact	35	Required. Enter the name of an official contact for the transmitter.
149–157	Transmitter Employer Identification Number (EIN)	9	Required. This must be the valid nine-digit number assigned to the transmitter by IRS. Do not enter hyphens, slashes, ALPHA characters, all 9's, or all zeroes.
158–165	Coverage Beginning Date	8	Required. This will be the date of the earliest original transaction on the file. It is to be a numeric 8-digit field in format century, year, month, and day (ccyymmdd).
166–173	Coverage Ending Date	8	Required. This will be the date of the latest original transaction on the file. It is to be a numeric 8-digit field in format century, year, month, and day (ccyymmdd).
174–181	Transmitter Control Code	8	Required. This is the code assigned by the IRS. This code is also entered on Form 4804.
182-409	Filler	228	
410	New Format Indicator	1	Required. Enter '4'.
411–420	User Field	10	

Parent Financial Institution (2A) Record - Required

This record identifies information regarding the Parent Financial Institution. The number of Financial Institution records will depend on the number of different Financial Institutions that are included on the file. Include the following data elements in this record:

Field Pos	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter '2A'.
3-37	Financial Institution Name	35	Required. Enter the Financial Institution's full legal name.
38-67	Institution Address	30	Required. Enter the address of the Institution. Do not abbreviate.
68-92	Institution City	25	Required. Enter the city where the Institution is located.
93-94	Institution State	2	Required. Enter the two (2) character state code. Use the correct abbreviation from http://www.fincen.gov/country_and_state_codes.pdf
95-103	Institution Zip Code	9	Required. Enter the zip code for the Institution.
104	Primary Federal Regulator	1	Required. Enter the Primary Federal Regulator as follows: A – Federal Reserve B – FDIC C – NCUA D – OCC E – OTS
105-113	Institution EIN	9	Required. Enter the EIN of the Parent Financial Institution.
114-410	Filler	297	
411-420	User Field	10	

Financial Institution Branch (2B) Record - Required

This record identifies information regarding the Financial Institution Branch where the activity occurred. The number of Financial Institution records will depend on the number of branches the Financial Institution is reporting on the magnetic media file. Include the following data elements in this record:

Field Pos	Field Name	Length	Description and Remarks
1 -2	Record Type	2	Required. Enter '2B'.
3-9	Branch Code	7	Required. Enter branch number for the submitting Branch. Right justify and zero fill.
10-39	Branch Office Address	30	Required. Enter the branch office address.
40-64	Branch Office City	25	Required. Enter the city where the branch office city.
65-66	Branch Office State	2	Required. Enter the two (2) character state code. Use the correct abbreviation from http://www.fincen.gov/country_and_state_codes.pdf
67-75	Branch Office Zip Code	9	Required. Enter the zip code for the branch office (US only).
76-77	Branch Office Country Code	2	Select the appropriate country code (if not the US). Use the correct abbreviation from http://www.fincen.gov/country_and_state_codes.pdf
78-85	Institution Closed Date	8	Required. Date Institution closed (if closed). It is to be a numeric eight (8) digit field in the format century, year, month, day (CCYYMMDD).
86-120	Contact Name	35	Name of the contact person.
121-160	Contact Title	40	Title of the contact person.
161-163	Contact Area Code	3	Area code of contact person.
164-170	Contact Phone Number	7	Phone number of contact person.
171-205	Contact Institution/Agency	35	Name of the Agency (if not filed by Financial institution).
206-410	Filler	205	
411-420	User Field	10	

Suspicious Activity (3A) Record - Required

This record identifies and describes the suspicious activity report. It occurs one time per suspicious activity. Include the following data elements in this record:

Field Pos	Field Name	Length	Description and Remarks	
1-2	Record Type	2	Required. Enter '3A'.	
3-9	Branch Code	7	Required. Enter the Branch Number for the submitting Branch. Right justify and zero fill.	
10-14	Transaction Sequence Number	5	Required. Enter a sequential number starting with 00001 and increment by 1 for each suspicious transaction (3A) record.	
15-36	Account Number 1	22	Account Number affected, if any.	
37	Account Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.	
38-59	Account Number 2	22	Additional account number affected.	
60	Account2 Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.	
61-82	Account Number 3	22	Additional account number affected.	
83	Account3 Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.	
84-105	Account Number 4	22	Additional account number affected.	

Suspicious Activity (3A) Record - Continued

Field Pos	Field Name	Length	Description and Remarks
106	Account4 Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.
107-115	Law Enforcement Agencies Advised	9	Enter the appropriate codes from the list below of the Law Enforcement Agencies that have already been advised (maximum of 9). A = DEA B = FBI C = IRS D = Postal Inspection E = Secret Service F = US CUSTOMS G = Other Federal H = State I = Local
116-150	Law Enforcement Agency Name	35	Enter the name of the Law Enforcement Agency already contacted (for G, H, or I Enforcement Agency Codes.
151-185	Law Enforcement Contact Person 1	35	Enter the name of person 1 contacted at Law Enforcement Agency.
186-188	Law Enforcement Agency Phone Number Area Code	3	Enter the area code of the enforcement agency contact person 1.
189-195	Law Enforcement Agency Phone Number	7	Enter the phone number of the Enforcement Agency contact person 1.
196-230	Law Enforcement Agency Contact Person 2	35	Enter the name of person 2 contacted at Law Enforcement Agency.
231-233	Law Enforcement Agency Phone Number Area Code	3	Enter the area code of the enforcement agency contact person 2.

Suspicious Activity (3A) Record - Continued

Field	Field Name	Length	Description and Remarks
Pos			·
234-240	Law Enforcement Agency Phone Number	7	Enter the phone number of the enforcement agency contact person 2.
241-248	From Violation Date	8	Enter the from date of the violation, CCYYMMDD format. Only enter if a range of dates. If only one date, enter here.
249-256	To Violation Date	8	Enter the to date of the violation. CCYYMMDD format. Only enter if a range of dates.
257-266	Violation Amount	10	Enter the dollar amount involved in known or suspected violation.
267-276	Violation Type	10	A maximum of 10 violation types as follows: A = BSA B = Bribery/Gratuity C = Check Fraud D = Check Kiting E = Commercial Loan Fraud F = Computer Intrusion G = Consumer Loan Fraud H = Counterfeit Check I = Counterfeit Credit/Debit Card J = Counterfeit Instrument K = Credit Card Fraud L = Debit Card Fraud M = Defalcation/Embezzlement N = False Statement O = Misuse of Position or Self-Dealing P = Mortgage Loan Fraud Q = Mysterious Disappearance R = Wire Transfer Fraud S = Other T = Terrorist Financing U = Identity Theft
277-316	Violation Type Other	40	If other Violation Type indicated, describe the violation.
317-326	Amount of Loss	10	Dollar Amount of Loss prior to recovery (if applicable).
327-336	Amount of Recovery	10	Dollar Amount of Recovery (if applicable).

Suspicious Activity (3A) Record - Continued

Field Pos	Field Name	Length	Description and Remarks
337	Material Impact Indicator	1	Has the suspected violation had a material impact on or otherwise affected the soundness of the institution: A = Yes B = No
338	Bonding Company Notified	1	Has the institution's bonding company been notified: A = Yes B = No
339-346	Prepared Date	8	Date Report Prepared. CCYYMMDD format.
347-348	Number of Suspects	2	Required. Number of Suspect Records. Must be equal to the number of Suspect 4A Records.
349-350	Number of Explanation/Descri ption Records	2	Required. Number of Explanation/Description Records. Must be equal to the number of Explanation/Description 6A Records.
351	Multiple Branch Code	1	If the suspicious activity took place at multiple branches, enter 'X'. Include the specific branch information in the narrative Part V.
352	Corrects Prior Report Indicator	1	Required. Enter 'X' if corrects prior report.
353	Suspect Information Unavailable	1	Enter 'X' if all the suspect information is unavailable. If this box is checked, there will be no 4A record.
354-410	Filler	57	
411-420	User Field	10	

Suspect Information (4A) Record - Required

This record contains information related to the Suspect's identity. There can be more than one of these records if there are multiple Suspects for the same suspicious activity.

Field Pos	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter "4A".
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch.
10-14	Transaction Sequence Number	5	Required. Enter the transaction sequence number from the associated 3A Record.
15-49	Suspect's Name	35	Enter the name of the Suspect in the format last name/first name/middle initial. Left justified and space filled. Follow the Name Editing Conventions shown in the attachment.
50-79	Suspect's Address	30	Enter the street address of the suspect. Left justified and space filled.
80- 104	Suspect's City	25	Enter the suspect's city. Left justified and space filled.
105- 106	Suspect's State	2	Select the appropriate state code for the suspect. Use the correct abbreviation from http://www.fincen.gov/country_and_state_codes.pdf
107- 115	Suspect's Zip Code	9	Enter the zip code for the suspect.
116- 117	Suspect's Country	2	Select the appropriate country code. Use the correct abbreviation from http://www.fincen.gov/country_and_state_codes.pdf
118- 126	Suspect's TIN	9	Enter the SSN/TIN of suspect.
127- 134	Suspect's Date of Birth	8	Enter suspect's date of birth. It is to be a numeric eight-digit field in the format century, year, month, day (CCYYMMDD).
135- 137	Suspect's Area Code	3	Enter suspect's residence area code.
138- 144	Suspect's Phone Number	7	Enter suspect's residence telephone number.
145- 147	Suspect's Work Area Code	3	Enter suspect's work area code.
148- 154	Suspect's Work Phone No.	7	Enter suspect's work telephone number.
155- 184	Suspect's Occupation	30	Enter the occupation, profession, or business of the suspect (i.e. attorney, securities broker, auto dealer, etc.).

Suspect Information (4A) Record - continued

Field Pos	Field Name	Length	Description and Remarks
185	Suspect's Identification	1	Enter the appropriate code for the method by which the individual's identity was verified. A - Drivers' License/State Id B - Passport C - Alien Registration D - Other Identification
186-225	Suspect's ID Other Description	40	If 'D - Other' enter the description of Identification.
226-247	Suspect's Identification Number	22	Enter the number used for identification.
248-249	Suspect Issuing Authority	2	Enter the appropriate code to designate the state/country where the identification was issued. Use the correct abbreviation from http://www.fincen.gov/country_and_state_codes.pdf
250-253	Suspect's Relationship	4	Enter the appropriate code(s) from the list below of the suspect's relationship to the Financial Institution. Include only the first four (4) applicable items. Left justify and space fill if less than four (4) items. A - Accountant B - Agent C - Appraiser D - Attorney E - Borrower F - Broker G - Customer H - Director I - Employee J - Officer K - Shareholder L - Other
254-293	Suspect's Relationship Other	40	If 'L – Other' indicated above, enter the description of relationship to Financial Institution.
294	Suspect's Affiliation	1	Suspect's Relationship is an insider relationship. Enter the appropriate code from the list below: A – Yes B – No
295	Suspect's Relationship	1	If Suspect Relationship is an insider, enter the appropriate code from the list below: C – Still Employed at Financial Institution D – Suspended E – Terminated F – Resigned

Suspect Information (4A) Record - continued

Field Pos	Field Name	Length	Description and Remarks
296-303	Suspect Termination Date	8	If 'D, E, or F' indicated above, enter the date action taken. It is to be a numeric eight digit field in format century, year, month, day (i.e. 19970831)
304	Suspect Admission/Confession Indicator	1	Enter the appropriate code: A – Yes B – No
305-410	Filler	106	
411- 420	User Filed	10	

Information Explanation/Description (6A) Record - Required

This record contains a detailed Explanation/Description of known or suspected violation of law. This record may occur multiple times. Include the following data elements in this record:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter "6A".
3–9	Branch Code	7	Required. Enter the branch number for the submitting branch.
10-14	Transaction Sequence	5	Required. Enter the transaction sequence number from the associated 3A Record.
15-410	Explanation/Descript ion	396	Enter a detailed Explanation/Description of the Suspicious Activity. Upper case characters only. Do not use low values or special characters.
411-420	User Field	10	

Branch Summary (9A) Record - Required

This record is required. There should be one of these records on the file for each Financial Institution branch that is being reported. This record contains counts of the number of each type of record associated with the branch. Include the following data elements in these records:

Field Pos.	Field Name	Length	Description and Remarks	
1-2	Record Type	2	Required. Enter `9A'.	
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch. Right justify and zero fill.	
10-16	Suspicious Activity Count	7	Required. Enter a count of the number of Suspicious Activity Records (3A) for the branch.	
17- 23	Suspect Record Count	7	Required. Enter the number of Suspect (4A) records for the branch.	
24-30	Explanation/Description	7	Required. Enter the number of description/Explanation (6A) records for the branch.	
31-410	Filler	380		
411-420	User Field	10		

Parent Financial Institution Summary (9B) Record - Required

There should only be one of these records on the file for each Financial institution that is being reported. This record is to follow the last reported Financial Institution (Branch) '9A' Summary Record for the Financial institution. This record contains counts of the number of each type record associated with the Financial institution. Include the following data elements for these records:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter `9B'.
3-9	Branch Record Count	7	Required. Enter count of Branch Records for the Financial Institution.
10-16	SAR count	7	Required. Enter count of SARs for the Financial Institution.
17-23	Suspect Record Count	7	Required. Enter count of Suspect Records for the Financial Institution.
24-30	Explanation/Description Count	7	Required. Enter count of explanation/description Records for the Financial Institution.
31-410	Filler	380	
411-420	User Field	10	

File Summary (9Z) Record - Required

There should only be one of these records on the file and it must be the very last record on the file. This record contains counts of the number of the various record types, which are on the file. These records should contain the following data elements:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter `9Z'.
3-9	Parent Financial Institution Record Count	7	Required. Enter count of Parent Financial Institution Records.
10-16	Branch Transaction Records	7	Required. Enter count of Branch Financial Institution Records.
17-23	SAR Count	7	Required. Enter count of SARs.
24-30	Suspect Record Count	7	Required. Enter count of Suspect Records.
31-37	Explanation/Description Counts	7	Required. Enter count of Explanation/Description Records.
38-410	Filler	373	
411-420	User Field	10	

Attachments – Standard Abbreviations

Word Abbreviation

Accounting ACCTG
Accounts ACCTS
Administration ADMIN

Air Force Base AFB

Apartment APT American AMER

Associates ASSOC Association ASSN

Avenue AVE

Bank BK

Banking BKG Branch BR

Broadway BWY Building BLDG

Casualty CASLTY Center CTR

Certificate CERT

Certificate of Deposit CD

Circle CRL

Commerce CMRC Commission COMM

Company CO

Comptroller COMPT Consolidated CONS

Construction CONST Corporation CORP

Cooperative COOP

County CNTY
Court CT

Credit Union CU
Department DEPT

Deposit DEP

Distributor, Distributing, DISTB

District DIST Division DIV Drive DR

Drive DR
East, Eastern E
Electrical ELEC
Exchange XCHG

Federal FED

Federal Credit Union FCU

Finance FIN Financial FINCL

First National Bank FNB

Foreign FORGN

Word Abbreviation

General GEN

Government GOVT

Group GRP

Headquarters HDQTRS

Highway HWY Hospital HOSP Incorporated INC Industry(ies) INDUST

Institute, Casino or Card Club INST

Insurance INS International INT

Information INFO

Lane LN

Limited LTD Management MGMT Manufacturers MFTRS

Manufacturing MFG

Market MKT Municipal MUN Mutual MUTL National NAT

Northeast NE Northern, North NO Northwest NW

Organization ORG

Park PK Place PL Plaza PLZ

Post Office PO

Railroad RR Realty RLTY

Road RD Room RM

Route RT Savings SAV

Savings and Loan SL

Security SEC Service SERV Southeast SE

Southern, South SO Southwest SW

Street ST Suite STE

Transportation TRANS

Trust TR

Standard Abbreviations Continued

Word Abbreviation

University UNIV
US Air Force USAF
US Army USA
US Coast Guard USCG
US Marine Corps USMC
US Navy USN
Village VLGE
Western, West W

Note: All abbreviations listed may be changed from singular to plural, and vice versa, by the addition or deletion of the letter 's'.

Attachments - Name Editing Instructions

- A. Delete any titles, prefixes, suffixes or other descriptive information such as Mr., Mrs., Dr., Reverend, Partner, or Trustee. Do not delete suffixes that distinguish family members such as Jr., Sr., III or IV. Suffixes should be edited to follow the middle initial (e.g. Doe\ John\L Jr).
- B. Delete all punctuation (e.g., 'JR.' would be submitted as 'JR').
- C. Do not use the following words in fields:
 - a. THE
- b. SEE ABOVE
- c. SAME AS ABOVE
- d. SAME
- e. COMPUTER GENERATED
- f. SIGNATURE CARD
- g. NONE
- h. NON CUSTOMER
- i. CUSTOMER
- j. T/A
- k. VARIOUS
- I. OTHER
- m. N/A
- n. UNKNOWN
- D. Spanish surnames. Care must be taken in formatting Spanish surnames as the names are usually written in the order of first name, father's last name, and then mother's last name, i.e., Juan Vega Santiago. The father's last name, Vega would be used as the last name; however, both last names should be retained. Example: Vega/Santiago/Juan.
- E. Place a slash ('/') before each name (including suffixes) except the first surname (e.g., White/Elizabeth/A) but not between compound names such as 'Van Gogh'.
- F. If only the surname of an individual is present, then place a slash after it (e.g., Jones/).
- G. If a non-individual is listed, do not enter slashes between names. Delete the word, 'The' whenever it appears.
- H. If an organization has a separate "doing business as" (DBA) name, enter the organization's legal and business names (e.g., "Smith Enterprises, Inc., DBA Smith Casino Tours").

Attachments - Definition of Terms

Account The customer's account **Number** as related to the transaction being reported, if any.

Corrected A report that is used to correct a **Report** that was previously filed.

Currency For SAR purposes, currency is the coin and paper money of the United States or any country, which is circulated and customarily used and accepted as money.

DBA Doing Business As

ECC-D The Enterprise Computing Center - Detroit

EIN Employer Identification Number

File For purposes of this procedure, a file consists of all magnetic cartridge or diskette records submitted by a transmitter.

Resolution Code Code which signifies who is to receive the correspondence relation to transactions.

SAR A Suspicious Activity Report by Financial Institution (Form TDF 90.22-47).

SSN Social Security Number

Suspect For SAR purposes, a suspect is a person with questionable/suspicious activities.

Transactor A person(s) who conducts a transaction.

Transmitter Person(s) or organization(s) who prepare the magnetic tape files.

Transmitter Control

Code (TCC) An eight-character number assigned by ECC-D to the transmitter prior to actual reporting on magnetic media. This code is inserted in most records of your files and must be present before the file can be processed. An Application for Magnetic Media Reporting must be filed with ECC-D to receive this number.